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EDITORIAL COMMENT

EX-PRESIDENT TAFT ON NURSES' AIDES

One of the means which the Red Cross is using to reach the people in their homes is the establishment of a Red Cross Department in the *Ladies' Home Journal*, with Ex-president William H. Taft as editor. Many of our readers may have seen Mr. Taft's comment on nurses' aides in the September issue of that magazine. For those who have not, we reprint it here, with his permission and that of the publishers.

Nurses who are doing Red Cross teaching in elementary hygiene and home nursing and others who are brought closely in touch with women of the leisure class who are anxious to receive appointments for service abroad, will find themselves many times embarrassed in answering the question why untrained women are not being accepted for the American hospital service as they are for England and other countries involved in the war. They will find here an answer to this question.

A DISTINCT CALL TO WOMEN

Have you felt that you could best answer the war's appeal to you by entering the nursing service? Then this is the day of your opportunity, provided you are in earnest and wish to set your patriotic impulses free in the place where they will do the most good.

That place is in a regular nurses' training school, such as is conducted in nearly every hospital in America. Many women, untrained in nursing, have been disappointed to learn that their services were not wanted on the field of battle, nor even in a base hospital.

It is the professional nurse only who has been called and accepted, and more than a thousand of her are now in active service. More thousands will follow soon. They are the finest of their profession, and they go gladly; but do you realize that each one is leaving behind her important work in civil life, which must now be done by someone else?

There is a limit to the number of our experienced nurses who can be spared for war service, unless there is assurance that for each one who goes at least another woman will step forward to prepare herself to take her place.

We have no right to expect—though we may hope for—a short war. We must put away makeshift methods, and think of a year from now, two years, perhaps even three years. The woman who enters training today is the woman who a little later will be prepared to take the place at home of the nurse who has gone, or even to follow her to the Front.

The Red Cross earnestly hopes that many young women, particularly those with the advantages of a good education, will let their desire to be of service take a most practical form and prepare to enter a profession which has been called upon to do so noble a work.

RED CROSS NURSING SERVICE IN TIME OF WAR

The main purpose of the Red Cross Nursing Service is to supply nurses to the Army and Navy as they may be required in event of war. When a nurse comes into the service one of the regulations is headed *Response to Call*. She is therein instructed "to report at once to her committee should the U. S. become involved in war." She is allowed to indicate her choice as to locality for service: (a) In her own locality, (b) anywhere in the United States; (c) wherever needed. After this she is expected to make tentative arrangements for duty. It does not necessarily follow, however, that she will be used in the locality that she has chosen, as this is not always possible. A Red Cross nurse can, in a measure, be compared to a soldier. As the soldier is expected to go where ordered, without question, it is expected that a nurse will accept service in the same spirit. Much confusion has arisen in the minds of the nurses concerning this service. For although the conditions under which we are engaged have developed the two fields, home and foreign service, it is quite impossible to allow a Red Cross nurse to take a definite stand in favor of either one or the other field, although she might be allowed to indicate her preference.

The Red Cross Nursing Service was asked by the Surgeon General shortly after the declaration of war by this country to provide two hundred nurses each month, in small groups, for our allies in France. It set about this task promptly by asking committees and individuals to organize special detachments. This plan was changed by the Government, and the Red Cross was asked to get the Base Hospitals ready for mobilization. With the exception of 235 nurses furnished to supplement six Base Hospital Units assigned to the British Expeditionary Forces, no detached groups have been sent, and present indications would make it appear that none will be immediately sent. So far, about one-half of the Base Hospitals have been assigned to service (there are 48) and only one hospital unit, of which there are 22.

As the opportunity for foreign service appears to be somewhat restricted, the Red Cross cannot give any special encouragement in this

direction. The cantonments, 32 in number, are requiring large numbers of nurses. Thousands of young men are being mobilized at these points, unquestionably much illness will occur, and hundreds of nurses will be required. So far the Red Cross has met the demands, but there is a very evident tendency to refuse this service. Nurses should remember that patriotic service is not confined to France or to the Army. It is fully as much our duty to care for our soldiers in mobilization camps and for our sailors in naval hospitals as for our sick and wounded men abroad. We are at war; orders and regulations are subject to rapid change. The ill fated hour "has struck" and our Red Cross Nursing Service is "put to the test," so the enrolled Red Cross nurse, who is the important unit in the organization, must never let it be said of her that it was found wanting at the critical moment because she hung back.

Many nurses write to the Red Cross stating they have been "ready, with trunk packed, for months." Nurses are urged not to resign positions until orders are issued. We can only emphasize the need for patience under what may appear to the individual as unnecessary delay. Nurses should face the situation (they are doing it) philosophically and seriously. The mobilization and sailing of a unit is a serious and hazardous matter. It is not a "trip abroad for sightseeing" or an adventure filled with delicious thrills. It may be all of both, but it is first and foremost a nursing mission calling for dignity, courage, endurance and a well-poised mind and body. The nurse, wherever she may be sent, should carry with her the spirit of the Great Master who "pleased not himself" but served humanity.

CRITICISM OF NURSING SCHOOLS

In spite of the hardships of a nurse's training,—rigid discipline, hard work, long hours, etc., the fact remains that there have been graduated from our schools, good and bad, large and small, a great body of women possessing in exceptional degree, executive ability, moral stamina, skill and versatility in practical work, who are carrying the largest share of the burden of the administration of the hospitals of the country and of the training of nurses to care for the sick in their homes, both in private duty and in the varying departments of public health. They are today conducting one of the most responsible departments of the Red Cross which is providing nursing service for the armies in France as well as for the great mobilization camps in this country, for the present war.

While we deplore the long hours, the hard work, the severe discipline and all the rest of the hardships often mentioned, as being to

some degree unnecessary, and while we look forward to a time when the present efforts of the profession shall have alleviated them, we believe that these hardships have not prevented and should not prevent women of character from entering the profession of nursing. Ours is not a profession for women who are looking for soft places in life and this is not a time when pampered girls are wanted in nursing. It is a field for a woman looking for an opportunity to give service and calls for self-denying character and strength.

RANK FOR ARMY NURSES

We have recently mentioned the effort that is being made to secure rank for army nurses. We have seen many arguments for it, but none that sums up the situation better than does a letter written by Helena McMillan, superintendent of the school of nurses of the Presbyterian Hospital, Chicago, addressed to Mr. A. M. Day, president of her hospital board. We quote the text from the monthly report of the alumnae association of the Illinois Training School.

The question of Congress granting a commission to the graduate nurse while on government duty has, as you know, been under discussion, but does not seem to be entirely understood, and for that reason I would like to present a few of the facts to you and ask your assistance in securing proper consideration of the matter.

The graduate nurse has learned by experience that military ranking is necessary to secure recognition, and therefore to obtain results, in the military world. Without a defined place, she is dependent on the judgment and good-will of heavily burdened officers, each commander deciding as to the opportunity given individual groups of nurses to put their professional knowledge into use, as to conditions allotted them in traveling and in camp, as to courtesies of treatment, and in fact every detail that makes up daily life in a military hospital.

It was this same lack of official status that hampered Florence Nightingale's work in the Crimean War, and which took all her indomitable courage and strong personality to contend against.

The British graduate nurses, in this present war, while continuing to nurse in the hospitals of France and England, openly resent the undignified and unfair position in which the government has placed them, the lack of appreciation of their services, of consideration for their welfare, and most of all, the lost opportunity of skilled nursing for the British soldiers. Instances are numerous in which untrained and unskilled but titled or influential women are placed in charge of the seriously wounded, while the graduate nurse, who is competent, but uninfluential and unprotected by military status, is delegated to duties which might be performed by any strong person. British nursing journals state that young women of a few months' training are sent to France and given higher authority than the graduate nurse without family or political backing. The unfortunate part of this is, of course, the confusion and lack of professional management, for which the sick soldier has to suffer.

It is to save the American troops from the same lack of expert nursing that a commission is asked for the American graduate nurse while on government duty, with the belief that her position being thus strengthened, she will be more able to maintain her authority against well-meaning but harmful amateurs. A commission would also obtain for the nurse a little more comfort in travel and camp life; it would secure some consideration if taken as a prisoner; it might prevent some of the petty humiliations the British nurses are putting up with. In the practical working of a military hospital there will be many helpers, orderlies, maids, and assistant women—not nurses. It is vital to the proper administration of the hospital that the nurses who are responsible for the care of the patients and their welfare shall have such authority as will compel respect and obedience from these necessary helpers. Many of them will be enlisted men and will not be apt to recognize authority unless it is fortified with a title. To get efficiency and the best results in such hospitals, nurses should have authority second only to the medical and surgical men, and such title as will make this authority evident.

As the nurse at best will experience many discomforts, and some hardships; as she will have periods of long and strenuous hours of work; as there is the possibility of loss of health and even life, and as her services in caring for the sick both at home and abroad are much needed, it does not seem unreasonable to ask a consideration which would help conserve health and strength. Medical and nursing authorities of the world recognize the high standing of the American nurse's schools and consequently of the American graduate nurse. Nurses selected by the Red Cross to serve the Government represent the very best of the American graduates. The government does not have to spend time or money training them; they are experts, ready for executive or bed-side duties; they are disciplined, professional women. Many of them have given up good positions; others have left remunerative private practice. The salary paid to the nurse by the government is a very moderate one; she is not granted a pension or an insurance, and in case of becoming incapacitated for work, has no assurance of permanent care.¹

Granting rank of Second Lieutenant to the nurse will not interfere with the authority of the medical profession, as the lowest ranking given to a medical army man is that of First Lieutenant. It has been sanctioned by a number of the leading medical men of the country.

To quiet the nurse and to please her, it has been suggested that a "Civil Title" be given. This would not satisfy her, as she is not craving title, but the results which military, not civil status, will bring—the possibility for effective work and position which she may hold without loss of self-respect.

The nurses going to the front are too absorbed with work to take any action in this matter, and it is being presented by those who stay at home and will not profit by commissions. It is felt that they will have the support of the public who understand graduate nurses, and of those who are interested in securing their services for the troops.

¹ Since the writing of this paper by Miss McMillan, we have seen that nurses are included in the provisions made in the Soldiers' and Sailors' Insurance Law.

PROGRESS OF STATE REGISTRATION

The Philippine Bill, an extract from which is given under Nursing News and Announcements, we understand became a law in 1915, but a copy of it has only recently come into our hands. This bill shows that the registration of nurses is made part of the medical registration and that there is no nurse representative on the board of examination and control. It has, however, several features in advance of anything that has been obtained so far in the States.

Under Section 7, it will be seen that a nurse to be eligible for registration must have graduated from a school giving a two and a half years' course, one of the prescribed subjects being housekeeping. Even untrained nurses cannot practice in the Islands without a license, and only regularly registered nurses of the first class may wear the nurses' uniform.

A SUGGESTION TO STATE COMMITTEES

Each state has been asked to appoint a Committee on Nursing to coöperate with the State Council of National Defense. It has been suggested that one important piece of work to be performed by these committees is that of acting as a clearing house for candidates to nurse schools. The larger and better known schools are, because of recent publicity, overwhelmed with applicants, more than can possibly be accepted, even with increased facilities. Other schools have not applicants enough. If these committees would ask to have the surplus candidates turned over to them, prospective students might be guided to the schools that need them, provided such schools offer the facilities for a thorough training.

WAR-RISK INSURANCE

As we close our pages, word has been received from Miss Thompson of the Army Nurse Corps of the recent act of Congress establishing a bureau in the Treasury Department which provides war-risk insurance for officers, nurses and enlisted men. Portions of this measure will be published in the next issue of the JOURNAL, but those wishing to know about it immediately, should write to the Bureau of War Risk Insurance, Treasury Department, Washington, D. C., for a copy of the bill or for instructions. Miss Thompson states that this is the first time members of the Army Nurse Corps have been included in any act of general legislation pertaining to the Army as a whole.